

Fill in this information to identify the case:

United States Bankruptcy Court for the:

**Northern District of Texas**

Case number (if known): \_\_\_\_\_ Chapter **7**

☐ Check if this is an amended filing

## Official Form 201

# Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/25

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name **Texas Disaster Restoration, LLC**

2. All other names debtor used in the last 8 years

**TDR Commercial Roofing**

**TDR Group**

Include any assumed names, trade names, and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN)

**4 6 - 2 6 5 5 7 0 9**

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

**2270 Springlake Road, Suite 400**

Number Street

**Dallas, TX 75234**

City State ZIP Code

**Dallas**

County

**2600 E. Southlake Blvd., Suite 120-204**

Number Street

**Southlake, TX 76092**

City State ZIP Code

Location of principal assets, if different from principal place of business

**Greenfill Storage**

**4770 US Hwy. 377 S.**

Number Street

**Aubrey, TX 76227**

City State ZIP Code

5. Debtor's website (URL)

**www.texasdisasterrestoration.com**

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify: \_\_\_\_\_

Debtor Texas Disaster Restoration, LLC

Case number (if known) \_\_\_\_\_

Name

**7. Describe debtor's business**

**A. Check one:**

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

**B. Check all that apply:**

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

**C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.**

2 3 8 1

**8. Under which chapter of the Bankruptcy Code is the debtor filing?**

**Check one:**

- ☒ Chapter 7
- ☐ Chapter 9
- ☐ Chapter 11. **Check all that apply:**
- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,424,000 (amount subject to adjustment on 4/01/28 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and it chooses to proceed under Subchapter V of Chapter 11.
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.
- ☐ Chapter 12

**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

☒ No

☐ Yes. District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

If more than 2 cases, attach a separate list.

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**

☒ No

☐ Yes. Debtor \_\_\_\_\_ Relationship \_\_\_\_\_

List all cases. If more than 1, attach a separate list.

District \_\_\_\_\_ When \_\_\_\_\_  
MM / DD / YYYY

Case number, if known \_\_\_\_\_

Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
Name

**11. Why is the case filed in *this* district?**

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention?** (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.  
What is the hazard?

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other \_\_\_\_\_

**Where is the property?**

Number Street

City State ZIP Code

**Is the property insured?**

☐ No

☐ Yes. Insurance agency \_\_\_\_\_  
Contact name \_\_\_\_\_  
Phone \_\_\_\_\_

**Statistical and administrative information**

**13. Debtor's estimation of available funds?**

Check one:

- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

**14. Estimated number of creditors**

- ☐ 1-49 ☒ 50-99 ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 25,001-50,000 ☐ 50,000-100,000
- ☐ 100-199 ☐ 200-999 ☐ 10,001-25,000 ☐ More than 100,000

**15. Estimated assets**

- ☐ \$0-\$50,000 ☒ \$1,000,001-\$10 million ☐ \$500,000,001-\$1 billion
- ☐ \$50,001-\$100,000 ☐ \$10,000,001-\$50 million ☐ \$1,000,000,001-\$10 billion
- ☐ \$100,001-\$500,000 ☐ \$50,000,001-\$100 million ☐ \$10,000,000,001-\$50 billion
- ☐ \$500,001-\$1 million ☐ \$100,000,001-\$500 million ☐ More than \$50 billion

Debtor Texas Disaster Restoration, LLC  
Name

Case number (if known) \_\_\_\_\_

**16. Estimated liabilities**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000          | <input checked="" type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000    | <input type="checkbox"/> \$10,000,001-\$50 million           | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input type="checkbox"/> \$100,001-\$500,000   | <input type="checkbox"/> \$50,000,001-\$100 million          | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million         | <input type="checkbox"/> More than \$50 billion        |

**Request for Relief, Declaration, and Signatures**

**WARNING --** Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature of authorized representative of debtor**

- The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- I have been authorized to file this petition on behalf of the debtor.
- I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 04/23/2025  
MM/ DD/ YYYY

**X** /s/ Christopher Evans  
Signature of authorized representative of debtor

Christopher Evans  
Printed name

Title Managing Member

**18. Signature of attorney**

**X** /s/ Scott Lawrence  
Signature of attorney for debtor

Date 04/23/2025  
MM/ DD/ YYYY

Scott Lawrence  
Printed name

Wick Phillips Gould & Martin, LLP  
Firm name

3131 McKinney Ave Suite 500  
Number Street

Dallas TX 75204  
City State ZIP Code

214-692-6200 scott.lawrence@wickphillips.com  
Contact phone Email address

24087896 TX  
Bar number State

Scott D. Lawrence, Tex. Bar No. 24087896  
scott.lawrence@wickphillips.com  
WICK PHILLIPS GOULD & MARTIN, LLP  
3131 McKinney Avenue, Suite 500  
Dallas, Texas 75204  
Phone: (214) 692-6200  
Fax: (214) 692-6255

COUNSEL FOR DEBTOR

**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE NORTHERN DISTRICT OF TEXAS  
DALLAS DIVISION**

<b>IN RE:</b>	§	
	§	<b>CASE NO. 25-xxxxx</b>
<b>TEXAS DISASTER RESTORATION, LLC</b>	§	
	§	<b>Chapter 7</b>
<b>DEBTOR.</b>	§	

**GLOBAL NOTES AND STATEMENT OF LIMITATIONS, METHODOLOGY, AND  
DISCLAIMERS REGARDING THE DEBTOR'S SCHEDULES OF ASSETS AND  
LIABILITIES AND STATEMENT OF FINANCIAL AFFAIRS**

Texas Disaster Restoration, LLC (the "Debtor"), as debtor in the above-captioned chapter 7 case (the "Case"), with the assistance of its attorneys, is filing its Schedules of Assets and Liabilities (the "Schedules") and Statement of Financial Affairs (the "SOFA") in the Bankruptcy Court for the Northern District of Texas, Fort Worth Division (the "Bankruptcy Court") pursuant to section 521 of title 11 of the United States Code (the "Bankruptcy Code") and Rule 1007 of the Federal Rules of Bankruptcy Procedure (the "Bankruptcy Rules").

These Global Notes and Statements of Limitations, Methodology, and Disclaimers regarding the Debtor's Schedules and SOFA (collectively, the "Global Notes") pertain to, are incorporated by reference in, and comprise an integral part of the Schedules and SOFA. The Global Notes should be referred to, considered, and reviewed in connection with any review of the Schedules and SOFA.

The Schedules and SOFA do not purport to represent financial statements prepared in accordance with Generally Accepted Accounting Principles in the United States ("GAAP"). Additionally, the Schedules and SOFA contain unaudited information based on the Debtor's commercially reasonable efforts to report the assets and liabilities of the Debtor. The Schedules and SOFA are not an admission that the Debtor was solvent or insolvent as of April 23, 2025 (the "Petition Date") or at any time before the Petition Date.

The information contained in the Schedules and SOFA was prepared based on the best information available and to the Debtor's knowledge and belief. The Debtor does not guarantee or warrant the accuracy or completeness of the data that is provided herein and shall not be liable for any loss or injury arising out of or caused in whole or in part by the acts, errors, or omissions, whether

negligent or otherwise, in procuring, compiling, collecting, interpreting, reporting, communicating, or delivering the information contained herein. While commercially reasonable efforts have been made to provide accurate and complete information herein, inadvertent errors or omissions may exist. The Debtor, its agents, and attorneys expressly do not undertake any obligation beyond the requirements of the Bankruptcy Code and the Bankruptcy Rules to update, modify, revise, or re-categorize the information provided herein, or to notify any third party should the information be updated, modified, revised, or re-categorized. In no event shall the Debtor or its agents and attorneys be liable to any third party for any direct, indirect, incidental, consequential, or special damages (including, but not limited to, damages arising from the disallowance of a potential claim against the Debtor or damages to business reputation, lost business, or lost profits), whether foreseeable or not and however caused, even if the Debtor or its agents and attorneys are advised of the possibility of such damages.

Christopher Evans ("Evans") has reviewed the Schedules and SOFA but the Schedules and SOFA are primarily based on the Debtor's books and records, which are incomplete. Specifically, the Debtor used online accounting software prior to the Petition Date to keep its books and records. The Debtor lost access to that accounting system in or about February, 2025, and lacked the resources necessary to reactivate access. As Evans has limited personal knowledge of the Debtor's books and records without access to the Debtor's accounting system, Evans has relied upon incomplete information in presenting the Schedules and SOFA. **Evans has not (and could not have) personally verify the accuracy of each amount, statement, and representation contained in the Schedules and SOFA.** However, Evans has a reasonable belief that the Schedules and SOFA are accurate and, pursuant to Rule 1009 of the Federal Rules of Bankruptcy Procedure, Evans will amend the Schedules and SOFA if necessary.

Fill in this information to identify the case:

Debtor Name **Texas Disaster Restoration, LLC**United States Bankruptcy Court for the: **Northern** District of **Texas**  
(State)

Case number (If known): \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets — Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes. Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****2. Cash on hand****\$0.00****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. **Bank of America****Checking account****3 4 1 3****\$0.00****4. Other cash equivalents (Identify all)**

4.1 \_\_\_\_\_

4.2 \_\_\_\_\_

**5. Total of Part 1**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$0.00****Part 2: Deposits and prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.  
☒ Yes. Fill in the information below.

**Current value of debtor's interest****7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1 \_\_\_\_\_

Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
Name

7.2 \_\_\_\_\_

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1 Whitley Penn LLP \$5,080.00

9. **Total of Part 2**

Add lines 7 through 8. Copy the total to line 81.

\$5,080.00

**Part 3:** Accounts receivable

10. **Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.  
☒ Yes. Fill in the information below.

Current value of  
debtor's interest

11. **Accounts receivable**

11a. 90 days old or less: \_\_\_\_\_ - \_\_\_\_\_ =..... →  
face amount doubtful or uncollectible accounts

11b. Over 90 days old: unknown - unknown =..... →  
face amount doubtful or uncollectible accounts \$1,121,242.50

12. **Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$1,121,242.50

**Part 4:** Investments

13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.  
☐ Yes. Fill in the information below.

Valuation method used  
for current value

Current value of  
debtor's interest

14. **Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1 \_\_\_\_\_

14.2 \_\_\_\_\_

15. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Name of entity: \_\_\_\_\_ % of ownership: \_\_\_\_\_

15.1. \_\_\_\_\_

15.2. \_\_\_\_\_

16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**

Describe:



Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
 Name

16.1 \_\_\_\_\_

16.2 \_\_\_\_\_

17. **Total of Part 4**

Add lines 14 through 16. Copy the total to line 83.

_____
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**Part 5:** Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.  
☒ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. <b>Raw materials</b>				
<b>Supplies -Cleaning/Disinfection</b>				
<b>Chemicals, PPE, Replacement Filters</b>	<u>12/17/2024</u> MM / DD / YYYY	<u>\$5,101.46</u>		<u>\$2,550.73</u>
20. <b>Work in progress</b>				
_____	_____	_____	_____	_____
	MM / DD / YYYY			
21. <b>Finished goods, including goods held for resale</b>				
_____	_____	_____	_____	_____
	MM / DD / YYYY			
22. <b>Other inventory or supplies</b>				
<b>Used Drying Equipment</b>	<u>12/17/2024</u> MM / DD / YYYY	<u>unknown</u>		<u>\$7,160.00</u>

23. **Total of Part 5**

Add lines 19 through 22. Copy the total to line 84.

<u>\$9,710.73</u>
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24. **Is any of the property listed in Part 5 perishable?**

- ☒ No  
☐ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

- ☒ No  
☐ Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \_\_\_\_\_

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**

- ☒ No  
☐ Yes

**Part 6:** Farming and fishing-related assets (other than titled motor vehicles and land)

Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
Name

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.  
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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28. Crops—either planted or harvested

--	--	--	--

29. Farm animals Examples: Livestock, poultry, farm-raised fish

--	--	--	--

30. Farm machinery and equipment (Other than titled motor vehicles)

--	--	--	--

31. Farm and fishing supplies, chemicals, and feed

--	--	--	--

32. Other farming and fishing-related property not already listed in Part 6

--	--	--	--

33. Total of Part 6

Add lines 28 through 32. Copy the total to line 85.

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34. Is the debtor a member of an agricultural cooperative?

- ☒ No  
☐ Yes. Is any of the debtor's property stored at the cooperative?  
☐ No  
☐ Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

- ☒ No  
☐ Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \_\_\_\_\_

36. Is a depreciation schedule available for any of the property listed in Part 6?

- ☒ No  
☐ Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☒ No. Go to Part 8.  
☐ Yes. Fill in the information below.

Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
 Name

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
40. Office fixtures			
41. Office equipment, including all computer equipment and communication systems equipment and software			
42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1			
42.2			
42.3			
43. Total of Part 7 Add lines 39 through 42. Copy the total to line 86.			
44. Is a depreciation schedule available for any of the property listed in Part 7? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
45. Has any of the property listed in Part 7 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<b>Part 8:</b> Machinery, equipment, and vehicles			
46. Does the debtor own or lease any machinery, equipment, or vehicles? <input type="checkbox"/> No. Go to Part 9. <input checked="" type="checkbox"/> Yes. Fill in the information below.			
General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1 2005 Ford Econoline E250 Van	unknown		\$2,000.00
47.2 2015 Chevrolet Express Cutaway G3500 Box Truck	unknown		\$2,000.00
47.3 2009 Outback 268 Camper	unknown		\$4,000.00
47.4 2020 Chevrolet Express 2500 Prochem Apex / VIN: 6353	unknown		\$8,657.43

Debtor **Texas Disaster Restoration, LLC** Case number (if known) \_\_\_\_\_  
 Name

47.5	2022 Chevrolet Silverado 1500 / VIN: 1069	unknown	\$33,953.30
47.6	2022 Chevrolet Silverado 2500 / VIN: 9952	unknown	\$42,452.48
47.7	2023 Chevrolet Silverado 1500 / VIN: 9099	unknown	\$36,694.04
47.8	2023 Chevrolet Silverado 1500 / VIN: 0625	unknown	\$34,688.74
47.9	2022 Chevrolet Express 3500 / VIN: 3842	unknown	\$39,322.28
47.10	2018 Chevrolet Silverado 1500 / VIN: 5204 Subject to GM Financial Loan	unknown	\$2,100.00
48.	Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels		
48.1	1995 Terex Trailer Mounted Generator	unknown	\$3,800.00
49.	Aircraft and accessories		
49.1			
49.2			
50.	Other machinery, fixtures, and equipment (excluding farm machinery and equipment)		
	2007 MQP40 Trailer Mounted Generator	unknown	\$2,500.00
51.	Total of Part 8 Add lines 47 through 50. Copy the total to line 87.		\$212,168.27
52.	Is a depreciation schedule available for any of the property listed in Part 8? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
53.	Has any of the property listed in Part 8 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 9:

Real property

54.	Does the debtor own or lease any real property? <input checked="" type="checkbox"/> No. Go to Part 10. <input type="checkbox"/> Yes. Fill in the information below.				
55.	Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest				
	Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1					
55.2					

Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
Name

55.3 \_\_\_\_\_  
55.4 \_\_\_\_\_  
55.5 \_\_\_\_\_  
55.6 \_\_\_\_\_

56. **Total of Part 9**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

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57. **Is a depreciation schedule available for any of the property listed in Part 9?**

☒ No  
☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

☒ No  
☐ Yes

**Part 10:** Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

☒ No. Go to Part 11.  
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. <b>Patents, copyrights, trademarks, and trade secrets</b>			
61. <b>Internet domain names and websites</b>			
62. <b>Licenses, franchises, and royalties</b>			
63. <b>Customer lists, mailing lists, or other compilations</b>			
64. <b>Other intangibles, or intellectual property</b>			
65. <b>Goodwill</b>			

66. **Total of Part 10**

Add lines 60 through 65. Copy the total to line 89.

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Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
Name

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☒ No  
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No  
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

**Part 11:** All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.  
☒ Yes. Fill in the information below.

Current value of  
debtor's interest

71. Notes receivable

Description (include name of obligor)

_____	—	_____	= →	_____
	Total face amount	doubtful or uncollectible amount		

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

_____	Tax year _____	_____
_____	Tax year _____	_____
_____	Tax year _____	_____

73. Interests in insurance policies or annuities

\_\_\_\_\_

74. Causes of action against third parties (whether or not a lawsuit has been filed)

<u>Gadberry Construction Company, Inc.</u>		<u>\$845,974.16</u>
Nature of claim	<u>Construction Contract</u>	
Amount requested	<u>unknown</u>	
<u>B.L. Harbert International, LLC</u>		<u>\$12,000.00</u>
Nature of claim	<u>Construction Contract</u>	
Amount requested	<u>unknown</u>	
<u>Ed &amp; Geralda Bailey</u>		<u>\$25,584.45</u>
Nature of claim	<u>Non-payment</u>	
Amount requested	<u>unknown</u>	

Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
 Name

<b>Glenda &amp; Edwin Conway</b>		<b>\$11,788.68</b>
Nature of claim	<u>Non-payment</u>	
Amount requested	<u>unknown</u>	
<b>Sterling Day</b>		<b>\$8,060.00</b>
Nature of claim	<u>Non-payment</u>	
Amount requested	<u>unknown</u>	
<b>DRL-DFW Housing Partners, LLC</b>		<b>\$413,596.76</b>
Nature of claim	<u>Arbitration Award &amp; Judgment</u>	
Amount requested	<u>unknown</u>	
<b>Alberta Sanchez</b>		<b>\$35,153.49</b>
Nature of claim	<u>Arbitration Award &amp; Judgment</u>	
Amount requested	<u>unknown</u>	
<b>Truth in the Word Church</b>		<b>\$49,070.57</b>
Nature of claim	<u>Non-payment</u>	
Amount requested	<u>unknown</u>	
<b>Kristin Boyd and Susan Romme</b>		<b>unknown</b>
Nature of claim	<u>Arbitration</u>	
Amount requested	<u>unknown</u>	
<b>Jorge &amp; Shannon Galvan</b>		<b>\$25,000.00</b>
Nature of claim	<u>Seeking Damages for Repairs</u>	
Amount requested	<u>unknown</u>	
75.	Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims	
<b>James Avery</b>		<b>unknown</b>
Nature of claim	<u>Injury</u>	
Amount requested	<u>unknown</u>	
76.	Trusts, equitable or future interests in property	
77.	Other property of any kind not already listed <i>Examples: Season tickets, country club membership</i>	
		<b>unknown</b>
78.	<b>Total of Part 11</b> Add lines 71 through 77. Copy the total to line 90.	<b>\$1,426,228.11</b>

Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
Name

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	<u>\$0.00</u>	
81. Deposits and prepayments. Copy line 9, Part 2.	<u>\$5,080.00</u>	
82. Accounts receivable. Copy line 12, Part 3.	<u>\$1,121,242.50</u>	
83. Investments. Copy line 17, Part 4.	<u></u>	
84. Inventory. Copy line 23, Part 5.	<u>\$9,710.73</u>	
85. Farming and fishing-related assets. Copy line 33, Part 6.	<u></u>	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	<u></u>	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	<u>\$212,168.27</u>	
88. Real property. Copy line 56, Part 9..... →		<div><u>                    </u></div>
89. Intangibles and intellectual property. Copy line 66, Part 10.	<u></u>	
90. All other assets. Copy line 78, Part 11.	+ <u>\$1,426,228.11</u>	
91. Total. Add lines 80 through 90 for each column.....91a.	<div><u>\$2,774,429.61</u></div>	+ 91b. <div><u>                    </u></div>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92. ....		<div><u>\$2,774,429.61</u></div>



Fill in this information to identify the case:

Debtor name **Texas Disaster Restoration, LLC**

United States Bankruptcy Court for the: **Northern** District of **Texas**  
(State)

Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 206D**

# Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.  
☒ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

**Column A**  
**Amount of claim**  
Do not deduct the value of collateral.

**Column B**  
**Value of collateral that supports this claim**

**2.1 Creditor's name**

**Ally Financial Inc.**

**Creditor's mailing address**

**2911 Lake Vista Dr**

**Lewisville, TX 75067**

**Creditor's email address, if known**

**Date debt was incurred**

**Last 4 digits of account number**

**Do multiple creditors have an interest in the same property?**

- ☒ No  
☐ Yes. Specify each creditor, including this creditor, and its relative priority.

**Describe debtor's property that is subject to a lien**

2020 Chevrolet Express 2500 Prochem Apex. 2022 Chevrolet Silverado 1500. 2022 Chevrolet Silverado 2500. 2023 Chevrolet Silverado 1500. 2023 Chevrolet Silverado 1500. 2022 Chevrolet Express 3500

**Describe the lien**

**Is the creditor an insider or related party?**

- ☒ No  
☐ Yes

**Is anyone else liable on this claim?**

- ☒ No  
☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).

**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**unknown**

**\$195,768.27**

**3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.**

**\$494,646.41**

Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
Name

Part 1: Additional Page		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.			
<b>2.2</b> Creditor's name <u>Bank of Oklahoma</u>  Creditor's mailing address <u>BOK Colorado Main</u> <u>1600 Broadway</u> <u>Denver, CO 80202</u>  Creditor's email address, if known _____  Date debt was incurred _____  Last 4 digits of account number _____  Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien <u>Substantially All Assets</u>  Describe the lien <u>Office</u>  Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).  As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$492,546.41</u>	<u>unknown</u>

Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
Name

Part 1: Additional Page		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.			
2.3	<p><b>Creditor's name</b> <u>GM Financial</u></p> <p><b>Creditor's mailing address</b> <u>4000 Embarcadero Dr</u> <u>Arlington, TX 76014</u></p> <p><b>Creditor's email address, if known</b> _____</p> <p><b>Date debt was incurred</b> <u>01/01/2019</u></p> <p><b>Last 4 digits of account number</b> <u>5</u> <u>5</u> <u>3</u> <u>8</u></p> <p><b>Do multiple creditors have an interest in the same property?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.            _____            _____  <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____         </p>	<p><b>Describe debtor's property that is subject to a lien</b> _____</p> <p><b>Describe the lien</b> <u>Auto Loan</u></p> <p><b>Is the creditor an insider or related party?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes         </p> <p><b>Is anyone else liable on this claim?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).         </p> <p><b>As of the petition filing date, the claim is:</b>            Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed         </p>	<p><b>\$2,100.00</b></p> <p><b>unknown</b></p>

Fill in this information to identify the case:

Debtor name Texas Disaster Restoration, LLC

United States Bankruptcy Court for the:

Northern District of Texas

Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

#### Part 1: List All Creditors with PRIORITY Unsecured Claims

**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507)

- ☐ No. Go to Part 2.  
☒ Yes. Go to line 2.

**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

**2.1** Priority creditor's name and mailing address

Comptroller of Public Accounts  
Audit Processing Section Division  
111 E. 17th Street  
Austin, TX 78774

Date or dates debt was incurred

Last 4 digits of account number 2 1 6 0

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent  
☒ Unliquidated  
☒ Disputed

Basis for the Claim:

Estimated Amounts Due - Disputed

Is the claim subject to offset?

- ☒ No  
☐ Yes

Total claim

\$150,627.23

Priority amount

\$150,627.23

**2.2** Priority creditor's name and mailing address

Dept of Treasury IRS  
Memphis, TN 38101

Date or dates debt was incurred

Last 4 digits of account number 5 7 0 9

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the Claim:

Is the claim subject to offset?

- ☒ No  
☐ Yes

\$7,115.01

\$7,115.01

Debtor Texas Disaster Restoration, LLC  
Name

Case number (if known) \_\_\_\_\_

Part 1: Additional Page

<b>2.3</b>	<b>Priority creditor's name and mailing address</b> <u>Dept of Treasury IRS</u> <u>Ogden, UT 84201</u>  Date or dates debt was incurred _____  Last 4 digits of account number _____  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) <u>(8)</u>	<b>As of the petition filing date, the claim is:</b> <u>unknown</u> <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the Claim:</b> _____  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>2.4</b>	<b>Priority creditor's name and mailing address</b> <u>IRS</u> <u>PO Box 742562</u> <u>Cincinnati, OH 45280</u>  Date or dates debt was incurred _____  Last 4 digits of account number _____  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) <u>(8)</u>	<b>As of the petition filing date, the claim is:</b> <u>unknown</u> <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the Claim:</b> _____  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
Name

**Part 2:** List All Creditors with NONPRIORITY Unsecured Claims

**3. List in alphabetical order all of the creditors with nonpriority unsecured claims.** If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim
<b>3.1</b>	<b>Nonpriority creditor's name and mailing address</b> <u>0097 CubeSmart TX</u> <u>2444 Luna Rd.</u> <u>Carrollton, TX 75006</u>  Date or dates debt was incurred _____ Last 4 digits of account number <u>0 1 1 8</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Storage Facility</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,618.80</u>
<b>3.2</b>	<b>Nonpriority creditor's name and mailing address</b> <u>3D Rollforming</u> _____ _____  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Supplier - Gadberry Project</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,335.00</u>
<b>3.3</b>	<b>Nonpriority creditor's name and mailing address</b> <u>ABC Supply Company, Inc.</u> <u>One ABC Parkway</u> <u>Beloit, WI 53511</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Supplier</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$5,754.97</u>
<b>3.4</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Alfredo Perez</u> _____ _____  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Subcontractor</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$480.00</u>

Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
Name

Part 2: Additional Page

<b>3.5</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Alvarez Masonry</u> <u>1419 Windmill Hill</u> <u>Cedar Hill, TX 75104</u>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	<b>As of the petition filing date, the claim is:</b> <u>\$64,265.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Subcontractor</u>  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
<b>3.6</b>	<b>Nonpriority creditor's name and mailing address</b> <u>B.L. Harbert International, L.L.C.</u> <u>P.O. Box 531390</u> <u>Birmingham, AL 35253</u>  Date or dates debt was incurred _____ Last 4 digits of account number - <u>S</u> <u>2</u> <u>5</u>	<b>As of the petition filing date, the claim is:</b> <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Attorney-Construction Contract</u>  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
<b>3.7</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Bank of America</u> <u>Bank of America Corporate Center</u> <u>PO Box 37978</u> <u>Charlotte, NC 28237</u>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	<b>As of the petition filing date, the claim is:</b> <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.8</b>	<b>Nonpriority creditor's name and mailing address</b> <u>BCBS of Texas</u> <u>P.O. Box 660044</u> <u>Dallas, TX 75266</u>  Date or dates debt was incurred _____ Last 4 digits of account number ____ _	<b>As of the petition filing date, the claim is:</b> <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Health Insurance</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
Name

Part 2: Additional Page

<b>3.9</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Beacon Sales Acquisition, Inc.</u> <u>505 Huntmar Park Drive Suite 300</u> <u>Herndon, VA 20170</u>  Date or dates debt was incurred _____ Last 4 digits of account number <u>0 3 7 6</u>	<b>As of the petition filing date, the claim is:</b> <u>\$24,419.03</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Supplier - Gadberry</b> <b>Basis for the claim:</b> <u>Project</u> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.10</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Berridge Manufacturing Company</u> <u>2610 Harry Wurzbach Road</u> <u>San Antonio, TX 78209</u>  Date or dates debt was incurred _____ Last 4 digits of account number <u>T X 0 3</u>	<b>As of the petition filing date, the claim is:</b> <u>\$1,608.75</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____ <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.11</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Bexar Solutions</u> <u>6516 NW County Rd.</u> <u>Barry, TX 75102</u>  Date or dates debt was incurred _____ Last 4 digits of account number <u>1 0 3 4</u>	<b>As of the petition filing date, the claim is:</b> <u>\$3,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Supplier - Gadberry</b> <b>Basis for the claim:</b> <u>Project</u> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.12</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Canam Systems (2002), Inc.</u> <u>PO Box 1233</u> <u>Tiny, ON LOL 2JO</u> <u>0</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <u>\$4,245.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Software Subscription</u> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes



Debtor Texas Disaster Restoration, LLC  
Name

Case number (if known) \_\_\_\_\_

**Part 2:** Additional Page

<b>3.13</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Carrollton DCAD</u> <u>1445 N. Perry Road</u> <u>Carrollton, TX 75011</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____ <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.14</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Cedar Drive, LLC</u> <u>12540 W. Cedar Drive</u> <u>Denver, CO 80228</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Contingent Indemnification Claims</u> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.15</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Chad Andrews</u> <u>715 E. Morgan Dr.</u> <u>Gilbert, AZ 85295</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____ <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.16</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Chris Evans</u> <u>9775 Windsong Drive</u> <u>Frisco, TX 75035</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Contingent Indemnification Claims</u> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
Name

Part 2: Additional Page

<p><b>3.17</b> Nonpriority creditor's name and mailing address</p> <p><u>CloudnetCanada, Inc.</u></p> <p><u>37 Mowrey Lane</u></p> <p><u>Nasonworth, NB E3B962</u></p> <p>_____</p> <p>_____</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>6</u> <u>9</u> <u>3</u> <u>4</u></p>	<p>As of the petition filing date, the claim is: <u>\$900.00</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Software Subscription</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.18</b> Nonpriority creditor's name and mailing address</p> <p><u>CSL Materials LLC</u></p> <p><u>8951 Collin McKinney Pkwy</u></p> <p><u>Mckinney, TX 75070</u></p> <p>_____</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$5,141.88</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Supplier - <u>Gadberry</u></p> <p>Basis for the claim: <u>Project</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.19</b> Nonpriority creditor's name and mailing address</p> <p><u>Dallas Central Appraisal District</u></p> <p><u>PO Box 560368</u></p> <p><u>Dallas, TX 75356</u></p> <p>_____</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>unknown</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.20</b> Nonpriority creditor's name and mailing address</p> <p><u>Dallas Central Appraisal District</u></p> <p><u>2949 North Stemmons Freeway</u></p> <p><u>Dallas, TX 75247</u></p> <p>_____</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>0</u> <u>0</u> <u>0</u> <u>0</u></p>	<p>As of the petition filing date, the claim is: <u>unknown</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Business Property Tax</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

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<p><b>3.21</b> Nonpriority creditor's name and mailing address</p> <p><u>Department of Public Safety</u></p> <p><u>39025 LBJ Service Rd.</u></p> <p><u>Dallas, TX 75232</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>9 5 0 4</u></p>	<p>As of the petition filing date, the claim is: <u>unknown</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Toll Tags</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.22</b> Nonpriority creditor's name and mailing address</p> <p><u>Double Eagle Plumbing</u></p> <p><u>2338 McClendon Rd</u></p> <p><u>Weatherford, TX 76088</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>    </u></p>	<p>As of the petition filing date, the claim is: <u>\$7,202.96</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Subcontractor</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.23</b> Nonpriority creditor's name and mailing address</p> <p><u>Dry Law PLLC</u></p> <p><u>909 18th Street</u></p> <p><u>Plano, TX 75074</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>    </u></p>	<p>As of the petition filing date, the claim is: <u>unknown</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Indemnity Agreement</b></p> <p>Basis for the claim: <u>on Bond</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.24</b> Nonpriority creditor's name and mailing address</p> <p><u>Gadberry Construction Company, Inc.</u></p> <p><u>1312 Conant Street</u></p> <p><u>Dallas, TX 75207</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>- 0 0 1</u></p>	<p>As of the petition filing date, the claim is: <u>unknown</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Construction Contract</u></p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes</p>

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<p><b>3.25</b> Nonpriority creditor's name and mailing address</p> <p><u>GreenFill Lone Star Boat RV &amp; Self</u></p> <p><u>4770 US-377</u></p> <p><u>Aubrey, TX 76227</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>6 2 7 7</u></p>	<p>As of the petition filing date, the claim is: <u>\$1,958.24</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Storage Facility</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.26</b> Nonpriority creditor's name and mailing address</p> <p><u>H&amp;E Equipment Services, Inc.</u></p> <p><u>7500 Pecue Lane</u></p> <p><u>Baton Rouge, LA 70809</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>1 8 2 2</u></p>	<p>As of the petition filing date, the claim is: <u>\$12,238.20</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Supplier</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.27</b> Nonpriority creditor's name and mailing address</p> <p><u>Holcim Solutions &amp; Products US, LLC</u></p> <p><u>12055 Cutten Road</u></p> <p><u>Houston, TX 77066</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$974.25</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Supplier</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.28</b> Nonpriority creditor's name and mailing address</p> <p><u>Iron Mountain</u></p> <p><u>2 Sun Court</u></p> <p><u>Norcross, GA 30092</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>7 Z N T</u></p>	<p>As of the petition filing date, the claim is: <u>\$4,596.21</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Document Storage</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

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<b>3.29</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Jessy Oliva</u> _____ _____ _____	<b>As of the petition filing date, the claim is:</b> <u>\$133.34</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Subcontractor</u> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Date or dates debt was incurred _____ Last 4 digits of account number _____	
<b>3.30</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Jon Don</u> <u>3630 W. Miller Road</u> <u>Garland, TX 75041</u> _____ _____ _____	<b>As of the petition filing date, the claim is:</b> <u>\$3,011.91</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Supplier</u> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Date or dates debt was incurred _____ Last 4 digits of account number _____	
<b>3.31</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Jonathan Neil &amp; Associates, Inc.</u> <u>131-A Stoney Circle 500</u> <u>Santa Rosa, CA 95401</u> _____ _____ _____	<b>As of the petition filing date, the claim is:</b> <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Date or dates debt was incurred _____ Last 4 digits of account number _____	
<b>3.32</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Jorge and Shannon Galvan</u> _____ _____ _____	<b>As of the petition filing date, the claim is:</b> <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Date or dates debt was incurred _____ Last 4 digits of account number _____	

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<p><b>3.33</b> Nonpriority creditor's name and mailing address</p> <p><u>Kristin and Susan Rommel-Boyd</u></p> <p><u>11940 Bamberg Lane</u></p> <p><u>Frisco, TX 75035</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>unknown</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.34</b> Nonpriority creditor's name and mailing address</p> <p><u>Lab19 LLC</u></p> <p><u>9116 High Plain Lane</u></p> <p><u>Dallas, TX 75249</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$3,800.00</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.35</b> Nonpriority creditor's name and mailing address</p> <p><u>Larry Peteis</u></p> <p><u>2109 Germantown Ct.</u></p> <p><u>Plano, TX 75075</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>unknown</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.36</b> Nonpriority creditor's name and mailing address</p> <p><u>Lerch Bates</u></p> <p><u>500 Golden Ridge Rd. Suite 150</u></p> <p><u>Golden, CO 80401</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$2,475.00</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Consultant</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

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<p><b>3.37</b> Nonpriority creditor's name and mailing address</p> <p><u>Markel Insurance Company</u></p> <p><u>SureTec Insurance Company</u></p> <p><u>9500 Arboretum Blvd Suite 400</u></p> <p><u>Austin, TX 78759</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>1</u> <u>4</u> <u>2</u> <u>1</u></p>	<p>As of the petition filing date, the claim is: <u>\$585,800.00</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Indemnity Agreement</b></p> <p>Basis for the claim: <u>on Bond</u></p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes</p>
<p><b>3.38</b> Nonpriority creditor's name and mailing address</p> <p><u>Matthew Critchley</u></p> <p><u>2652 E. Tamarisk St.</u></p> <p><u>Gilbert, AZ 85296</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>unknown</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Contingent</b></p> <p>Basis for the claim: <u>Indemnification Claims</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.39</b> Nonpriority creditor's name and mailing address</p> <p><u>Melissa Evans</u></p> <p><u>6225 Parker Blvd.</u></p> <p><u>North Richland Hills, TX 76180</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>unknown</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Contingent</b></p> <p>Basis for the claim: <u>Indemnification Claims</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.40</b> Nonpriority creditor's name and mailing address</p> <p><u>Mercury County Mutual Insurance Co.</u></p> <p><u>P.O. Box 5600</u></p> <p><u>Rancho Cucamonga, CA 91729</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$5,764.90</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Insurance</b></p> <p>Basis for the claim: <u>Insurance</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

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<p><b>3.41</b> Nonpriority creditor's name and mailing address</p> <p><u>MI-BOX Moving and Mobile Storage</u></p> <p><u>10427 Sanden Dr.</u></p> <p><u>Dallas, TX 75238</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$5,295.40</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Temporary Storage</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.42</b> Nonpriority creditor's name and mailing address</p> <p><u>National Construction Rentals, Inc.</u></p> <p><u>3600 Halifax St.</u></p> <p><u>Dallas, TX 75247</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$55.68</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Supplier - <u>Gadberry</u></p> <p>Basis for the claim: <u>Project</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.43</b> Nonpriority creditor's name and mailing address</p> <p><u>New Braunfels-Alliant Insurance Svcs Inc</u></p> <p><u>P.O. Box 8377</u></p> <p><u>Pasadena, CA 91109</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$118.00</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Bond Broker</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.44</b> Nonpriority creditor's name and mailing address</p> <p><u>North Texas Tollway Authority</u></p> <p><u>P.O. Box 660244</u></p> <p><u>Dallas, TX 75266</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>9 5 0 4</u></p>	<p>As of the petition filing date, the claim is: <u>unknown</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Toll Tags</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>



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<p><b>3.45</b> Nonpriority creditor's name and mailing address</p> <p><u>Pope Plumbing, Inc.</u></p> <p><u>3205 Main St.</u></p> <p><u>Rowlett, TX 75088</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>0 9 6 4</u></p>	<p>As of the petition filing date, the claim is: <u>\$8,200.66</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Subcontractor</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.46</b> Nonpriority creditor's name and mailing address</p> <p><u>Scorp Innovations, LLC</u></p> <p><u>14500 Marsh Ln, Suite 241</u></p> <p><u>Addison, TX 75001</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$3,269.11</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Subcontractor</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.47</b> Nonpriority creditor's name and mailing address</p> <p><u>Soprema Inc. (USA)</u></p> <p><u>P.O. Box 75755</u></p> <p><u>Cleveland, OH 44101</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>6 6 6 5</u></p>	<p>As of the petition filing date, the claim is: <u>\$250,282.11</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.48</b> Nonpriority creditor's name and mailing address</p> <p><u>Soprema Inc. (USA)</u></p> <p><u>310 Quadral Drive</u></p> <p><u>Wadsworth, OH 44281</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>6 6 6 5</u></p>	<p>As of the petition filing date, the claim is: <u>\$24,340.70</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Gadberry Project</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

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<b>3.49</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Sosas Custom Cabinets, LLC</u> <u>4747 Almond Ave.</u> <u>Dallas, TX 75247</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <u>\$375.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Subcontractor</u> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.50</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Suretec Insurance Company</u> <u>2103 CityWest Blvd., Suite 1300</u> <u>Houston, TX 77042</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.51</b>	<b>Nonpriority creditor's name and mailing address</b> <u>T&amp;R Texas Ventures One, LLC</u> <u>9775 Windsong Drive</u> <u>Frisco, TX 75035</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Contingent Indemnification Claims</u> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.52</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Texas Craftmanship Renovation, LLC</u> <u>Attn: Adolfo Romero</u> <u>0</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <u>\$12,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Subcontractor</u> <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
Name

Part 2: Additional Page

<p><b>3.53</b> Nonpriority creditor's name and mailing address</p> <p><u>Texas Insulation (EOAKIS, LLC)</u></p> <p><u>dba Texas Insulation</u></p> <p><u>4730 Bronze Way</u></p> <p><u>75236</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$1,125.00</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Subcontractor</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.54</b> Nonpriority creditor's name and mailing address</p> <p><u>Texas Mutual Insurance Company</u></p> <p><u>2200 Aldrich Street</u></p> <p><u>Austin, TX 78723</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>4 2 4 2</u></p>	<p>As of the petition filing date, the claim is: <u>\$11,414.00</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Insurance</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.55</b> Nonpriority creditor's name and mailing address</p> <p><u>Texas Mutual Insurance Company</u></p> <p><u>P.O. Box 841843</u></p> <p><u>Dallas, TX 75284</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>4 2 4 2</u></p>	<p>As of the petition filing date, the claim is: <u>unknown</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
<p><b>3.56</b> Nonpriority creditor's name and mailing address</p> <p><u>The Art Guys</u></p> <p><u>Anthony Corporate Enterprises, LLC</u></p> <p><u>4240 International Pkwy 140</u></p> <p><u>Carrollton, TX 75007</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$344.24</u></p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Subcontractor</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>

Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
Name

Part 2: Additional Page

<b>3.57</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Tom Ratino</u> <u>6731 Foxpointe Rd.</u> <u>Fort Worth, TX 76132</u>  Date or dates debt was incurred _____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____ <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.58</b>	<b>Nonpriority creditor's name and mailing address</b> <u>TransUnion Risk &amp; Alt Data Svcs Inc</u> <u>P.O. Box 209047</u> <u>Dallas, TX 75320</u>  Date or dates debt was incurred _____ Last 4 digits of account number <u>5</u> <u>5</u> <u>1</u> <u>1</u>	<b>As of the petition filing date, the claim is:</b> <u>\$319.80</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Software Subscription</u> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.59</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Tyler Hobbs</u> <u>17681 E. Colt Ct.</u> <u>Queen Creek, AZ 85142</u>  Date or dates debt was incurred _____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Contingent Indemnification Claims</u> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.60</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Verizon</u> <u>PO Box 4001</u> <u>Acworth, GA 30101</u>  Date or dates debt was incurred _____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <u>\$907.45</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Cell Phone Service</u> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
Name

Part 2: Additional Page

<b>3.61</b>	<b>Nonpriority creditor's name and mailing address</b> <u>Waxahachie Painting and Construction</u> <u>3795 FM 66</u> <u>Waxahachie, TX 75167</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <u>\$17,471.13</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Subcontractor</u> <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
<b>3.62</b>	<b>Nonpriority creditor's name and mailing address</b> <u>WEX</u> _____ _____ _____  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <u>\$9,524.44</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Fuel Card</u> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
Name

**Part 3:** List Others to Be Notified About Unsecured Claims

**4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2.** Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

**If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.**

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<u>BL Harbert International</u> <u>820 Shades Creek Parkway 3000</u> <u>Birmingham, AL 35209</u>	Line <u>3.6</u> <input type="checkbox"/> Not listed. Explain _____	____ _

Debtor Texas Disaster Restoration, LLC  
Name

Case number (if known) \_\_\_\_\_

**Part 4:** Total Amounts of the Priority and Nonpriority Unsecured Claims

**5. Add the amounts of priority and nonpriority unsecured claims.**

**Total of claim amounts**

5a. **Total claims from Part 1**

5a. \$157,742.24

5b. **Total claims from Part 2**

5b. **+** \$1,087,766.16

5c. **Total of Parts 1 and 2**  
Lines 5a + 5b = 5c.

5c. \$1,245,508.40

Fill in this information to identify the case:

Debtor name Texas Disaster Restoration, LLC

United States Bankruptcy Court for the:

Northern District of Texas

Case number (if known): \_\_\_\_\_ Chapter 7

☐ Check if this is an amended filing

## Official Form 206G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest	<u>Storage Unit</u>	<u>0097 CubeSmart TX Carrollton Luna Road</u> <u>2444 Luna Road</u> <u>Carrollton, TX 75006</u>
	State the term remaining	<u>0 months</u>	
	List the contract number of any government contract		
2.2	State what the contract or lease is for and the nature of the debtor's interest	<u>Accounting Software</u>	<u>Canam Systems (2002) Inc.</u> <u>P.O. Box 1233, Tiny, ON LOL 2JO</u>
	State the term remaining	<u>0 months</u>	
	List the contract number of any government contract		
2.3	State what the contract or lease is for and the nature of the debtor's interest	<u>Cloud Software</u>	<u>CloudNetCanada Inc.</u> <u>37 Mowrey Lane, Nasonworth, NB E3B 9G2</u>
	State the term remaining	<u>0 months</u>	
	List the contract number of any government contract		
2.4	State what the contract or lease is for and the nature of the debtor's interest	<u>Storage Units</u>	<u>Greenfill Storage</u> <u>4770 US Hwy. 377 S.</u> <u>Aubrey, TX 76227</u>
	State the term remaining	<u>0 months</u>	
	List the contract number of any government contract		



Debtor Texas Disaster Restoration, LLC  
Name

Case number (if known) \_\_\_\_\_

**Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5	State what the contract or lease is for and the nature of the debtor's interest	<u>IT and Email Management Services</u>	<u>Lab19 LLC</u>
	State the term remaining	<u>0 months</u>	<u>9116 High Plain Lane</u>
	List the contract number of any government contract	_____	<u>Dallas, TX 75249</u>
2.6	State what the contract or lease is for and the nature of the debtor's interest	<u>Contracted Storage</u>	<u>MI-BOX Moving and Mobile Storage</u>
	State the term remaining	<u>0 months</u>	<u>10427 Sanden Dr.</u>
	List the contract number of any government contract	_____	<u>Dallas, TX 75238</u>
2.7	State what the contract or lease is for and the nature of the debtor's interest	<u>Wireless (Mobile) Phone Service</u>	<u>Verizon</u>
	State the term remaining	<u>0 months</u>	<u>P.O. Box 4001</u>
	List the contract number of any government contract	_____	<u>Acworth, GA 30101</u>

Fill in this information to identify the case:

Debtor name Texas Disaster Restoration, LLC

United States Bankruptcy Court for the: Northern District of Texas  
(State)

Case number (If known): \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206H

## Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

## 1. Does the debtor have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, **Schedules D-G**. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.1 Cedar Drive, LLC	_____ Street _____ City State ZIP Code	Bank of Oklahoma	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		Markel Insurance Company	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
		Bank of America	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
		Suretec Insurance Company	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.2 Critchley, Matthew	_____ Street _____ City State ZIP Code	Bank of Oklahoma	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		Markel Insurance Company	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
		Bank of America	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
		Suretec Insurance Company	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.3 Evans, Christopher	_____ Street _____ City State ZIP Code	Bank of Oklahoma	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		Beacon Sales Acquisition, Inc.	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G

Debtor Texas Disaster Restoration, LLC Case number (if known) \_\_\_\_\_  
Name

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
		Markel Insurance Company	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
		Soprema Inc. (USA)	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
		Suretec Insurance Company	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.4	<b>Evans, Melissa</b> Street _____ _____ City _____ State _____ ZIP Code _____	Markel Insurance Company Suretec Insurance Company	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G <input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.5	<b>Hobbs, Tyler</b> Street _____ _____ City _____ State _____ ZIP Code _____	Bank of America	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.6	<b>T&amp;R Texas Ventures One, LLC</b> Street _____ _____ City _____ State _____ ZIP Code _____	Bank of Oklahoma Markel Insurance Company Bank of America Suretec Insurance Company	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G <input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G <input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:

Debtor name Texas Disaster Restoration, LLC

United States Bankruptcy Court for the:

Northern District of Texas

Case number (if known): \_\_\_\_\_ Chapter 7

☐ Check if this is an amended filing

## Official Form 206Sum

# Summary of Assets and Liabilities for Non-Individuals

12/15

### Part 1: Summary of Assets

#### 1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

##### 1a. Real Property:

Copy line 88 from *Schedule A/B*.....

\$0.00

##### 1b. Total personal property:

Copy line 91A from *Schedule A/B*.....

\$2,774,429.61

##### 1c. Total of all property:

Copy line 92 from *Schedule A/B*.....

\$2,774,429.61

### Part 2: Summary of Liabilities

#### 2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*.....

\$494,646.41

#### 3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

##### 3a. Total claim amounts of priority unsecured claims:

Copy the total claims from Part 1 from line 5a of *Schedule E/F*.....

\$157,742.24

##### 3b. Total amount of claims of non-priority amount of unsecured claims:

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*.....

+ \$1,087,766.16

#### 4. Total liabilities.....

Lines 2 + 3a + 3b

\$1,740,154.81

Fill in this information to identify the case:

Debtor name Texas Disaster Restoration, LLC

United States Bankruptcy Court for the:

Northern District of Texas

Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 202

### Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

#### Declaration and signature

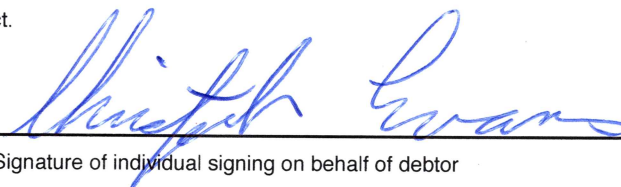
I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ Schedule A/B: Assets—Real and Personal Property (Official Form 206A/B)
- ☒ Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- ☒ Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- ☒ Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- ☒ Schedule H: Codebtors (Official Form 206H)
- ☒ A Summary of Assets and Liabilities for Non-Individuals (Official Form 206A-Summary)
- ☐ Amended Schedule \_\_\_\_\_
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 04/23/2025  
MM/ DD/ YYYY

X 

Signature of individual signing on behalf of debtor

Christopher Evans

Printed name

Managing Member

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Texas Disaster Restoration, LLC

United States Bankruptcy Court for the:

Northern District of Texas

Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 207

## Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy 04/25

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

### Part 1: Income

#### 1. Gross revenue from business

☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue

Check all that apply

Gross revenue

(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2025 to Filing date  
MM/ DD/ YYYY

☒ Operating a business

☒ Other Operating Business

\$83,398.16

For prior year:

From 01/01/2024 to 12/31/2024  
MM/ DD/ YYYY MM/ DD/ YYYY

☒ Operating a business

☐ Other \_\_\_\_\_

\$3,171,733.00

For the year before that:

From 01/01/2023 to 12/31/2023  
MM/ DD/ YYYY MM/ DD/ YYYY

☒ Operating a business

☐ Other \_\_\_\_\_

\$9,196,347.00

#### 2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None

Description of sources of revenue

Gross revenue from each source

(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2025 to Filing date  
MM/ DD/ YYYY

For prior year:

From 01/01/2024 to 12/31/2024  
MM/ DD/ YYYY MM/ DD/ YYYY

For the year before that:

From 01/01/2023 to 12/31/2023  
MM/ DD/ YYYY MM/ DD/ YYYY

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$8,575. (This amount may be adjusted on 4/01/28 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer Check all that apply
3.1. <b>Comptroller</b> Creditor's name		<b>\$59,629.39</b>	<input type="checkbox"/> Secured debt
			<input type="checkbox"/> Unsecured loan repayments
Street			<input type="checkbox"/> Suppliers or vendors
			<input type="checkbox"/> Services
			<input checked="" type="checkbox"/> Other <b>Bank of America Offset</b>
City State ZIP Code			

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or co-signed by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$8,575. (This amount may be adjusted on 4/01/28 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. <b>Hobbs, Tyler</b> Creditor's name		<b>\$0.00</b>	Healthcare
Street			
City State ZIP Code			
Relationship to debtor			
4.2. <b>Evans, Christopher</b> Creditor's name		<b>\$0.00</b>	Healthcare \$1,988.96/month;\$2,500 Weekly through Dec 13, 2024 Salary\$130,000.00 annually
Street			
City State ZIP Code			
Relationship to debtor			

4.3. Critchley, Matthew \$0.00 Heathcare \$2,199.27/month Through Feb. 15, 2025 Last Monthly Payment Jan. 15, 2025 - Paid Monthly Until Then

Creditor's name

Street

City State ZIP Code

Relationship to debtor

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Description of the property	Date	Value of property
5.1. Cube Smart Creditor's name	Stored equipment, tools, roofing materials	04/18/2025	\$10,000
Street			
City State ZIP Code			

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
6.1. Bank of America Creditor's name	Setoff TDR Account	04/15/2025	\$19,939.94
Street	XXXX- _ _ _ _		
City State ZIP Code			
6.2. Bank of America Creditor's name	Setoff Critchley Account	12/01/2024	\$18,511.71
Street	XXXX- _ _ _ _		
City State ZIP Code			



Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☒ None

7.1.	<div>Case title</div> <div></div> <div>Case number</div> <div></div>	<div>Nature of case</div> <div></div>	<div>Court or agency's name and address</div> <div>Name</div> <div></div> <div>Street</div> <div></div> <div>City</div> <div>State</div> <div>ZIP Code</div>	<div>Status of case</div> <div><input type="checkbox"/> Pending</div> <div><input type="checkbox"/> On appeal</div> <div><input type="checkbox"/> Concluded</div>
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8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

8.1.	<div>Custodian's name and address</div> <div></div> <div>Custodian's name</div> <div></div> <div>Street</div> <div></div> <div>City</div> <div>State</div> <div>ZIP Code</div>	<div>Description of the property</div> <div></div> <div>Case title</div> <div></div> <div>Case number</div> <div></div> <div>Date of order or assignment</div> <div></div>	<div>Value</div> <div></div> <div>Court name and address</div> <div>Name</div> <div></div> <div>Street</div> <div></div> <div>City</div> <div>State</div> <div>ZIP Code</div>
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Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☒ None

9.1.	<div>Recipient's name and address</div> <div></div> <div>Recipient's name</div> <div></div> <div>Street</div> <div></div> <div>City</div> <div>State</div> <div>ZIP Code</div> <div>Recipient's relationship to debtor</div> <div></div>	<div>Description of the gifts or contributions</div> <div></div>	<div>Dates given</div> <div></div>	<div>Value</div> <div></div>
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Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☒ None

Description of the property lost and how the loss occurred

Amount of payments received for the loss

If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.

List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).

Date of loss

Value of property lost

10.1. \_\_\_\_\_

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

11.1.	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
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Wick Phillips Gould & Martin, LLP

Address

3131 McKinney Ave., Suite 500

Street

Dallas, TX 75204

City State ZIP Code

Email or website address

Who made the payment, if not debtor?

Payor	Amount	Date
Matthew Critchley (TDR Member) (Into Trust)	\$25,000.00	8/21/2024
Texas Disaster Restoration, LLC (Into Trust)	\$9,801.55	10/29/2024
Sullivan on Gilbert (TDR Customer) (Into Trust)	\$13,754.39	1/8/2025
The Peavler Group (TDR Litigation Counsel) (Into Trust)	\$13,726.77	1/22/2025
Total Client Funds Provided	\$62,282.71	
Total Applied from Trust Prepetition	(\$53,856.48)	
Remaining Balance / Fee for Chapter 7 Case	\$8,426.23	

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None

12.1.	Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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Trustee

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None

13.1.	Who received the transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
<div>Address</div> <div>Street</div> <div>CityStateZIP Code</div> <div>Relationship to debtor</div>				

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

	Address	Dates of occupancy
14.1.	<div>2270 Springlake Road, Suite 400</div> <div>Street</div> <div>Dallas, TX 75234</div> <div>CityStateZIP Code</div>	From To
14.1.	<div>2600 E. Southlake Blvd., Suite 120-204</div> <div>Street</div> <div>Southlake, TX 76092</div> <div>CityStateZIP Code</div>	From To
14.1.	<div>4770 US Hwy. 377 S.</div> <div>Street</div> <div>Greenfill Storage</div> <div>Aubrey, TX 76227</div> <div>CityStateZIP Code</div>	From To

**Part 8:** Health Care Bankruptcies

**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:  
—diagnosing or treating injury, deformity, or disease, or  
—providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.

☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
15.1. _____ Facility name  _____ Street  _____ City State ZIP Code	_____  _____ <b>Location where patient records are maintained</b> (if different from facility address). If electronic, identify any service provider. _____ _____	_____  _____ <b>How are records kept?</b> <i>Check all that apply:</i> <input type="checkbox"/> Electronically <input type="checkbox"/> Paper

**Part 9:** Personally Identifiable Information

**16. Does the debtor collect and retain personally identifiable information of customers?**

☒ No.

☐ Yes. State the nature of the information collected and retained. \_\_\_\_\_

Does the debtor have a privacy policy about that information?

☐ No

☐ Yes

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

☐ No. Go to Part 10.

☒ Yes. Does the debtor serve as plan administrator?

☐ No. Go to Part 10.

☒ Yes. Fill in below:

Name of plan	Employer identification number of the plan
<b>Fidelity Investments</b> _____	EIN: _____
Has the plan been terminated? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 10:** Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
--	---------------------------------	-----------------	--	---

18.1

XXXX- - - - -

☐Checking

☐Savings

☐Money market

☐Brokerage

☐Other

Name

Street

City

State

ZIP Code

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒None

19.1	Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
	<div><div>Name</div><div>Street</div><div></div><div>City</div><div>State</div><div>ZIP Code</div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div><input type="checkbox"/> No</div><div><input type="checkbox"/> Yes</div></div>
		Address		

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐None

20.1	Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
	<div><div><b>Greenfill Storage</b></div><div>Name</div><div><b>4770 US Hwy. 377 S.</b></div><div>Street</div><div></div><div><b>Aubrey, TX 76227</b></div><div>City</div><div>State</div><div>ZIP Code</div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div><input checked="" type="checkbox"/> No</div><div><input type="checkbox"/> Yes</div></div>
		Address		

20.2	Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
	<div><div><b>0097 CubeSmart TX</b></div><div>Name</div><div><b>2444 Luna Rd.</b></div><div>Street</div><div></div><div><b>Carrollton, TX 75006</b></div><div>City</div><div>State</div><div>ZIP Code</div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div><input checked="" type="checkbox"/> No</div><div><input type="checkbox"/> Yes</div></div>
		Address		

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Owner's name and address	Location of the property	Description of the property	Value
<div>Name</div>			
<div>Street</div>			
<div></div>			
<div>CityStateZIP Code</div>			

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- ☐ *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- ☐ *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- ☐ *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

☒ No  
☐ Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
<div></div>	<div>Name</div>		<input type="checkbox"/> Pending
<div>Case number</div>	<div>Street</div>		<input type="checkbox"/> On appeal
	<div></div>		<input type="checkbox"/> Concluded
	<div>CityStateZIP Code</div>		

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

☒ No  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
<div>Name</div>	<div>Name</div>		
<div>Street</div>	<div>Street</div>		
<div></div>	<div></div>		
<div>CityStateZIP Code</div>	<div>CityStateZIP Code</div>		

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No
- ☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		
Street	Street		
City State ZIP Code	City State ZIP Code		

Part 13: Details About the Debtor’s Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1.		EIN: _ _ - _ _ _ _ _
Name		Dates business existed
Street		From _____ To _____
City State ZIP Code		

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor’s books and records within 2 years before filing this case.

- ☒ None

Name and address	Dates of service
26a.1.	From _____ To _____
Name	
Street	
City State ZIP Code	

26b. List all firms or individuals who have audited, compiled, or reviewed debtor’s books of account and records or prepared a financial statement within 2 years before filing this case.

- ☒ None

Name and address	Dates of service
26b.1. _____ Name _____ Street _____ City State ZIP Code	From _____ To _____

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address	If any books of account and records are unavailable, explain why
26c.1. <b>Canam Systems (2002)</b> Name _____ Street _____ City State ZIP Code	<u>Records are unavailable because of nonpayment</u> _____

Name and address	If any books of account and records are unavailable, explain why
26c.2. <b>Iron Mountain</b> Name _____ Street _____ City State ZIP Code	<u>Records are unavailable because of nonpayment</u> _____

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address
26d.1. _____ Name _____ Street _____ City State ZIP Code

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
_____	_____	_____



Name

## Name and address of the person who has possession of inventory records

27.1.

Name

Street

City

State

ZIP Code

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Evans, Christopher			0.00%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No☐ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
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From

To

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☒ No☐ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
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30.1.

Name

Street

City

State

ZIP Code

## Relationship to debtor

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

☒ No☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

EIN: - - - - -

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
- ☐ Yes. Identify below.

Name of the pension fund	Employer Identification number of the pension fund
	EIN: - - - - -

Part 14: Signature and Declaration

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 04/23/2025  
MM/ DD/ YYYY

X

/s/ Christopher Evans

Signature of individual signing on behalf of the debtor

Printed name

Christopher Evans

Position or relationship to debtor Managing Member

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
- ☐ Yes

Scott D. Lawrence, Tex. Bar No. 24087896  
 scott.lawrence@wickphillips.com  
 WICK PHILLIPS GOULD & MARTIN, LLP  
 3131 McKinney Avenue, Suite 500  
 Dallas, Texas 75204  
 Phone: (214) 692-6200  
 Fax: (214) 692-6255

COUNSEL FOR DEBTOR

**IN THE UNITED STATES BANKRUPTCY COURT  
 FOR THE NORTHERN DISTRICT OF TEXAS  
 DALLAS DIVISION**

<b>IN RE:</b>	§	
	§	<b>CASE NO. 25-xxxxx</b>
<b>TEXAS DISASTER RESTORATION, LLC</b>	§	
	§	<b>Chapter 7</b>
<b>DEBTOR.</b>	§	

**DISCLOSURE OF COMPENSATION OF COUNSEL FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that the firm Wick Phillips Gould & Martin, LLP (“Wick Phillips”) is bankruptcy counsel for Debtor Texas Disaster Restoration, LLC (“Debtor”) and the compensation paid to Wick Phillips within one year before the filing of the bankruptcy petition for services rendered on behalf of the Debtor in contemplation of or in connection with the bankruptcy case is as follows:

<b>Payor</b>	<b>Amount</b>	<b>Date</b>
Matthew Critchley (TDR Member) (Into Trust)	\$25,000.00	8/21/2024
Texas Disaster Restoration, LLC (Into Trust)	\$9,801.55	10/29/2024
Sullivan on Gilbert (TDR Customer) (Into Trust)	\$13,754.39	1/8/2025
The Peavler Group (TDR Litigation Counsel) (Into Trust)	\$13,726.77	1/22/2025
<b>Total Client Funds Provided</b>	<b>\$62,282.71</b>	
<b>Total Applied from Trust Prepetition</b>	<b>(\$53,856.48)</b>	
<b>Remaining Balance / Fee for Chapter 7 Case</b>	<b>\$8,426.23</b>	

2. In return for the above-disclosed fees, Wick Phillips agreed to render legal service for all aspects of the bankruptcy case, including:

- (i) Analysis of the Debtor’s financial situation, and rendering advice to the Debtor in determining whether to file a petition in bankruptcy;
- (ii) Preparation and filing of any petition, schedules, statements of financial affairs and plan which may be required;
- (iii) Representation of the Debtor at the meeting of creditors and any adjourned

hearings thereof; and

- (iv) Advising and consulting on the conduct of the Chapter 7 Case.

### **CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to Wick Phillips for representation of the Debtor in this bankruptcy proceeding.

Dated: April 23, 2025

/s/ Scott D. Lawrence

Scott D. Lawrence, Tex. Bar No. 24087896

**WICK PHILLIPS GOULD & MARTIN, LLP**

3131 McKinney Avenue, Suite 500

Dallas, Texas 75204

Telephone: (214) 692-6200

Facsimile: (214) 692-6255

scott.lawrence@wickphillips.com

*Counsel to Debtor*

IN THE UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
DALLAS DIVISION

IN RE: **Texas Disaster Restoration, LLC**

CASE NO

CHAPTER 7

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date **04/23/2025**

Signature **/s/ Christopher Evans**  
Christopher Evans, Managing Member

Document Page 62 of 62  
**UNITED STATES BANKRUPTCY COURT**  
**NORTHERN DISTRICT OF TEXAS**  
**DALLAS DIVISION**

IN RE:  
**Texas Disaster Restoration, LLC**

CHAPTER 7

DEBTOR(S)

CASE NO

**LIST OF EQUITY SECURITY HOLDERS**

<b>Registered Name of Holder of Security Last Known Address or Place of Business</b>	<b>Class of Security</b>	<b>Number Registered</b>	<b>Kind of Interest Registered</b>
<b>Chad Andrews</b> 11618 E. Chestnut Court, Chandler, AZ 85249	LLC Units	2040	LLC Units
<b>Matthew Critchley</b> 2652 E. Tamarisk Street, Gilbert, AZ 85296	LLC Units	2040	LLC Units
<b>Tyler Hobbs</b> 4114 E. Gleneagle Drive, Chandler, AZ 85249	LLC Units	1020	LLC Units
<b>Cedar Drive, LLC</b> 12540 W. Cedar Drive, Lakewood, CO 80228	LLC Units	1900	LLC Units
<b>T&amp;R Texas Venture One, LLC</b> 507 Timber Lake Way, Southlake, TX 76092	LLC Units	3000	LLC Units

**DECLARATION UNDER PENALTY OF PERJURY  
ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, the Managing Member of the Nonpublic Corporation  
named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true  
and correct to the best of my information and belief.

Date: 04/23/2025

Signature: /s/ Christopher Evans  
*Christopher Evans, Managing Member*